

### ***Caution: DRAFT FORM***

This is an advance proof copy of an IRS tax form. It is subject to change and OMB approval before it is officially released. You can check the scheduled release date on our web site ([www.irs.gov](http://www.irs.gov)).

If you have any comments on this draft form, you can submit them to us on our web site. Include the word DRAFT in your response. You may make comments anonymously, or you may include your name and e-mail address or phone number. We will be unable to respond to all comments due to the high volume we receive. However, we will carefully consider each suggestion. So that we can properly consider your comments, please send them to us within 30 days from the date the draft was posted.

## Change of Address

► Please type or print.

OMB No. 1545-1163

► See instructions on back.

► Do not attach this form to your return.

### Part I Complete This Part To Change Your Home Mailing Address

Check **all** boxes this change affects:

- 1 ☐ Individual income tax returns (Forms 1040, 1040A, 1040EZ, TeleFile, 1040NR, etc.)  
► If your last return was a joint return and you are now establishing a residence separate from the spouse with whom you filed that return, check here ☐
- 2 ☐ Gift, estate, or generation-skipping transfer tax returns (Forms 706, 709, etc.)  
► For Forms 706 and 706-NA, enter the decedent's name and social security number below.
- Decedent's name \_\_\_\_\_ ► Social security number \_\_\_\_\_

**3a** Your name (first name, initial, and last name)

**3b** Your social security number

**4a** Spouse's name (first name, initial, and last name)

**4b** Spouse's social security number

**5** Prior name(s). See instructions.

**6a** Old address (no., street, city or town, state, and ZIP code). If a P.O. box or foreign address, see instructions.

Apt. no.

**6b** Spouse's old address, if different from line 6a (no., street, city or town, state, and ZIP code). If a P.O. box or foreign address, see instructions.

Apt. no.

**7** New address (no., street, city or town, state, and ZIP code). If a P.O. box or foreign address, see instructions.

Apt. no.

### Part II Complete This Part To Change Your Business Mailing Address or Business Location

Check **all** boxes this change affects:

- 8 ☐ Employment, excise, income, and other business returns (Forms 720, 940, 940-EZ, 941, 990, 1041, 1065, 1120, etc.)  
9 ☐ Employee plan returns (Forms 5500, 5500-EZ, etc.)  
10 ☐ Business location

**11a** Business name

**11b** Employer identification number

**12** Old mailing address (no., street, city or town, state, and ZIP code). If a P.O. box or foreign address, see instructions.

Room or suite no.

**13** New mailing address (no., street, city or town, state, and ZIP code). If a P.O. box or foreign address, see instructions.

Room or suite no.

**14** New business location (no., street, city or town, state, and ZIP code). If a foreign address, see instructions.

Room or suite no.

### Part III Signature

Daytime telephone number of person to contact (optional) ► ( ) \_\_\_\_\_

**Sign Here**

Your signature

Date

If Part II completed, signature of owner, officer, or representative Date

If joint return, spouse's signature

Date

Title